

UNITED STATES DISTRICT COURT

For the _____ District of MassachusettsDomenic V. DiModica,
PlaintiffAPPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVITV.
Robert Murphy, Kathleen Dennehy and
The Massachusetts Department of Correction

Defendant

05-10286 PBS
CASE NUMBERI, Domenic V. DiModica declare that I am the (check appropriate box)☒ petitioner/plaintiff/movant ☐ other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated?
- ☐
- Yes
- ☒
- No (If "No," go to Part 2)

I am civilly committed to a secure mental health facility.
If "Yes," state the place of your incarceration Nemasket Correctional Center, a/k/a
The Massachusetts Treatment Center at Bridgewater.Are you employed at the institution? No. Do you receive any payment from the _____

Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed?
- ☐
- Yes
- ☒
- No

a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

I am mentally retarded. See the report of Dr. Schwartz for the details of my very limited employment in the 1970's and 80's as well as my employment in the Treatment Center.

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|---|-----------------------------|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. Disability or workers compensation payments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. Gifts or inheritances <i>from my mother</i> | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. Any other sources | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

AO 240 Reverse (Rev. 9/96)

I receive gifts from my mother. Please see the print out of my institutional account for the last six months here at the Treatment Center. *I used to have a job on my unit making \$5.00 per week*

4. Do you have **any** cash or checking or savings accounts? ☐ Yes ☒ No

If "Yes," state the total amount. _____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? ☐ Yes ☒ No

If "Yes," describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support. *None.*

I declare under penalty of perjury that the above information is true and correct.

January 29, 2005
Date

Domenic V. DiModica
Domenic V. DiModica Signature of Applicant

NOTICE TO PRISONER: A Prisoner seeking to proceed IFP shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS

FILED
IN CLERKS OFFICE

2005 FEB -4 P 1:38

U.S. DISTRICT COURT
DISTRICT OF MASS.

Domenic V. DiModica

V.
Robert Murphy, Kathleen Dennehy and
The Massachusetts Department of Correction

CIVIL ACTION NO. _____

05 - 10286 PBS

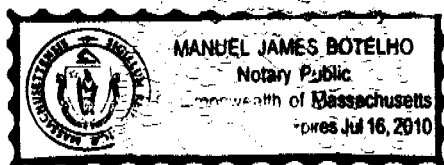
AFFIDAVIT

I, Domenic V. DiModica, an applicant to proceed in forma pauperis in the
above named case, hereby depose and say as follows:

1. Attached hereto is a copy of the records reflecting the current status of my prison
account maintained pursuant to the provisions of Massachusetts General Laws, Ch. 128,
Sec. 3, and applicable regulations of the Department of Corrections.
2. Of those funds currently maintained in my prison account, the amount of _____
\$ 0 represents compensation paid to my account for labor performed within
the meaning of Massachusetts General Laws, c. 127 sec. 48(a).

Domenic DiModica
Signature of Applicant
Domenic V. DiModica

Sworn and subscribed to before me this 1 day of FEB 2005
1993.



Manuel James Botelho
NOTARY PUBLIC

MASSACHUSETTS SIGNATURE WITNESSING

Gov. Exec. Ord. #455 (03-13), §5(f)

Commonwealth of Massachusetts

County of Plymouth

} SS.

On this the 1 day of February, 2005, before me,
Day Month Year

Manuel James BOTELHO, the undersigned Notary Public,
Name of Notary Public

Personally appeared DOMENIC DIMODICA,
Name(s) of Signer(s)

Proved to me through satisfactory evidence of identity, which was/were

INMATE I.D.# M01014

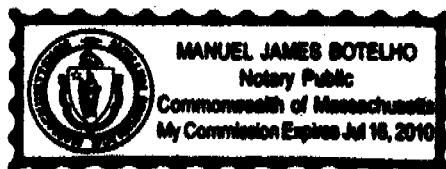
Description of Evidence of Identity

To be the person(s) whose name(s)
Was/were signed on the preceding or
Attached document in my presence.


Signature of Notary Public

Manuel James BOTELHO
Printed Name of Notary

My Commission Expires 16 Jul 2010



COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF CORRECTION

Inmate Transaction Report

Date : 20050131 13:44

Page : 1

Commit# : M01014

MASS. TREATMENT CENTER

Name : DIMODICA, DOMENIC, V.

Statement From 20040731

Inst : MASS. TREATMENT CENTER

To 20050131

Block : A2

Cell/Bed : 024 /B

05 - 10286 PBS

Transaction Date	Type	Receipt #	Check No	Inst Name	Notes	Personal		Savings	
						Income	Expense	Income	Expense
Total Transaction before this Period :						\$1,281.60	\$1,154.36	\$0.00	\$0.00
20040804 23:01	PY - Payroll	3181657		MTC	~20040718 To 20040724	\$5.00	\$0.00	\$0.00	\$0.00
20040811 17:03	IS - Interest	3210030		MTC		\$0.18	\$0.00	\$0.00	\$0.00
20040811 23:01	PY - Payroll	3226054		MTC	~20040725 To 20040731	\$5.00	\$0.00	\$0.00	\$0.00
20040818 23:01	PY - Payroll	3254175		MTC	~20040801 To 20040807	\$5.00	\$0.00	\$0.00	\$0.00
20040825 23:01	PY - Payroll	3282878		MTC	~20040808 To 20040814	\$5.00	\$0.00	\$0.00	\$0.00
20040901 23:01	PY - Payroll	3311081		MTC	~20040815 To 20040821	\$5.00	\$0.00	\$0.00	\$0.00
20040908 16:50	IS - Interest	3336234		MTC		\$0.24	\$0.00	\$0.00	\$0.00
20040908 23:01	PY - Payroll	3352215		MTC	~20040822 To 20040828	\$5.00	\$0.00	\$0.00	\$0.00
20040915 23:01	PY - Payroll	3382097		MTC	~20040829 To 20040904	\$5.00	\$0.00	\$0.00	\$0.00
20040917 08:55	ML - Mail	3392071	3215	STH	~SALVATORE DIMODICA	\$50.00	\$0.00	\$0.00	\$0.00
20040917 08:55	TI - Transfer from Institution	3392074		MTC	~Associate Receipt Number is 3392071	\$50.00	\$0.00	\$0.00	\$0.00
20040917 08:55	TI - Transfer from Institution	3392073		STH	~Associate Receipt Number is 3392071	\$0.00	\$50.00	\$0.00	\$0.00
20040922 23:01	PY - Payroll	3410598		MTC	~20040905 To 20040911	\$5.00	\$0.00	\$0.00	\$0.00
20040929 23:02	PY - Payroll	3437968		MTC	~20040912 To 20040918	\$5.00	\$0.00	\$0.00	\$0.00
20040930 22:30	CN - Canteen	3445102		MTC	~Canteen Date : 20040930	\$0.00	\$29.79	\$0.00	\$0.00
20041005 13:37	IC - Transfer from Inmate to Club A/c	3458910		MTC	~CANTEEN CORP. WASH ACCOUNT - Z6-CANTEEN CORP. WASH ACCOUNT - Z6	\$0.00	\$176.41	\$0.00	\$0.00
20041006 23:02	PY - Payroll	3468899		MTC	~20040919 To 20040925	\$5.00	\$0.00	\$0.00	\$0.00
20041013 16:59	IS - Interest	3501480		MTC		\$0.34	\$0.00	\$0.00	\$0.00
20041013 23:01	PY - Payroll	3516108		MTC	~20040926 To 20041002	\$5.00	\$0.00	\$0.00	\$0.00
20041020 23:01	PY - Payroll	3548348		MTC	~20041003 To 20041009	\$5.00	\$0.00	\$0.00	\$0.00
20041021 22:30	CN - Canteen	3556893		MTC	~Canteen Date : 20041021	\$0.00	\$3.10	\$0.00	\$0.00
20041028 22:30	CN - Canteen	3585228		MTC	~Canteen Date : 20041028	\$0.00	\$11.77	\$0.00	\$0.00
20041110 16:46	IS - Interest	3647200		MTC		\$0.09	\$0.00	\$0.00	\$0.00
20041111 22:30	CN - Canteen	3668806		MTC	~Canteen Date : 20041111	\$0.00	\$14.52	\$0.00	\$0.00
20041115 08:41	ML - Mail	3674422	3254	STH	~SALVATORE DIMODICA	\$50.00	\$0.00	\$0.00	\$0.00
20041115 08:41	TI - Transfer from Institution	3674426		STH	~Associate Receipt Number is 3674422	\$0.00	\$49.00	\$0.00	\$0.00
20041115 08:41	TI - Transfer from Institution	3674427		MTC	~Associate Receipt Number is 3674422	\$49.00	\$0.00	\$0.00	\$0.00
20041115 08:41	MA - Maintenance and Administration	3674424		STH	~Monthly Maintenance and Administration Fee	\$0.00	\$1.00	\$0.00	\$0.00
20041116 14:17	CI - Transfer from Club to Inmate A/c	3683100		MTC	~REFUND 11/11/04-M01014 DIMODICA, DOMENIC V PERSONAL-KCN WASH	\$1.00	\$0.00	\$0.00	\$0.00

Date : 20050131 13:44

Page : 2

Commit# : M01014

MASS. TREATMENT CENTER

Name : DIMODICA, DOMENIC, V,

Statement From 20040731

Inst : MASS. TREATMENT CENTER

To 20050131

Block : A2

Cell/Bed : 024 /B

Current Balances :

Personal	Savings	Freeze	Loan	Restitution	Sentence
\$71.77	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00